CUSTODY/VISITATION APPLICATION - PARENT

APPLICATION - PARENJD-FM-161 Rev. 4-23
C.G.S. §§ 46b-56, 46b-61;

STATE OF CONNECTICUT SUPERIOR COURT

www.jud.ct.gov

Court use only APPLCUS APPLVIS Use for custody applications Use for visitation applications

☐ Custody ☐ Visitation

Instructions

P.B. §§ 25-3, 25-4, 25-5

- 1. Select the "Custody" or "Visitation" box above, and complete pages 1 and 2 of this form. Attach the Order to Show Cause and Notice to the Respondent (form JD-FM-162), Notice of Automatic Court Orders (form JD-FM-158), and Affidavit Concerning Children (form JD-FM-164).
- 2. By the first scheduled court date for this case, you <u>must</u> file the accompanying document(s) listed in number 2 below that prove the existing legal relationship between the parents and the child or children. You must redact (remove) any personal identifying information, as defined by Section 4-7 of the Connecticut Practice Book, from the accompanying document(s). If you plan to file a copy of an acknowledgment of parentage, make sure the original is completed and filed with the Department of Public Health before filing this Application. (Contact the Department of Social Services or the Department of Public Health Vital Records Office for assistance with acknowledgments of parentage.)
- 3. If you are a grandparent or a third party (not a legal parent), and you want to file for visitation with the child or children, use the Verified Petition for Visitation Grandparents & Third Parties (form JD-FM-221).

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Judicial District of	At (Town)			Docket number
Applicant's name (Last, first, middle initial)		Respondent's name (Last, first, middle initial)		
Other parent's name (If other parent is not the respondent)(Last, first, middle initial)		Other parent's address (If other parent is not the respondent)		
Additional respondent's name (If applicable) (Last, first, middle)	e initial)	I.		
1. I am the child's or children's parent.				
 2. I understand that by the first scheduled date for this case, I must file the applicable accompanying document(s) from this list that prove the existing legal relationship between the parents and the child or children named in this application with any personal identifying information, as defined by Section 4-7 of the Connecticut Practice Book, redacted (removed) or the case may be dismissed. I plan to file the following document(s) to prove parentage: (Select all that apply) A copy of the birth certificate of the child or children naming the parents; A copy of a properly executed (finalized) acknowledgement of parentage; A court order or decree naming the legally responsible parents (including an adoptive parent); A surrogacy agreement naming the parents (see General Statutes Section 7-36); Document(s) showing that the child or children was/were born during my marriage to the respondent; or Any other evidence sufficient (enough) to prove legal parentage of the child or children. 				
3. The respondent(s) is/are the: Parent Grandparent Other: (Specify)				
4. I want: (Select one) custody of the child (or children) listed below visitation rights with the child (or children) listed below (Attach additional sheets if necessary)				
Child's name (First, middle, last)	Dat	te of birth	Name(s) of pare	nt(s) or guardian(s) (First, middle initial, last)
5. Connecticut has the authority to decide this case and should decide this case because: (Select all that apply)				
a. Connecticut is the home state of the child (or children) at the time of the filing of this case.				
b. The child (or children) has (or have) lived in Connecticut for the past 6 months, or from birth if the child (or children) is (or are) younger than 6 months old.				
c. The child (or children) lived in Connecticut for at least 6 months but was (or were) taken from Connecticut less than 6 months ago by a person claiming custody, and a parent or guardian continues to live here.				
d. The child (or children) and at least one parent have a significant connection to Connecticut, and there is substantial evidence in Connecticut concerning the child's (or children's) present or future care, protection, training, and personal relationships.				
e. The child (or children) is (or are) in Connecticut now and has (or have) been abandoned, or there is an emergency affecting the child's (or children's) well-being.				
f. No other state has an interest in hearing this case, and it is in the best interest of the child (or children) for a Connecticut court to hear the case.				

Additional Instructions: If you are the parent and want custody, go to Number 6 below, and continue from there. If you are the parent and want visitation, go to the Claim For Relief section below, and continue from there. 6. The applicant, respondent, or any child (or children) listed has (or have) received financial support and/or HUSKY from the State of Connecticut: Financial Support: (Select one) Yes ☐ No Do not know HUSKY Health Insurance: (Select one) Yes □ No ☐ Do not know If you selected yes for Financial Support and/or HUSKY, send a copy of this Application, Order to Show Cause and Notice to the Respondent, Notice of Automatic Court Orders, and any other document filed with this application to the Office of the Attorney General, 165 Capitol Avenue, Hartford, CT 06106, and file the Certification of Notice (form JD-FM-175) with the court clerk. 7. The applicant, respondent, or any child (or children) listed has (or have) received financial support from a city or town in Connecticut: (Select one) Yes (City or town): □No Do not know If you selected yes, send a copy of this Application, Order to Show Cause and Notice to the Respondent, Notice of Automatic Court Orders, and any other document filed with this application to the City or Town Clerk of the city or town providing assistance, and file the Certification of Notice (form JD-FM-175) with the court clerk. Claim for Relief For Custody: (The Applicant asks the Court for custody orders) (Select all that apply) Regarding decision-making responsibility: Sole legal custody Joint legal custody A parenting responsibility plan, which includes a plan for the parental decision-making regarding the child or children And Regarding physical custody: Primary residence with: A parental physical access schedule and/or visitation Regarding child support: (If custody application — includes cash medical, health insurance, unreimbursed medical expenses, and qualifying child care) Child Support An order for the educational support of my child (or children) for post-high school education or training under General Statutes Section 46b-56c. For Visitation: (The Applicant asks the Court for visitation orders as follows)

ADA NOTICE

Print name of person signing at left

Date signed

Telephone (Area code first)

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact the Centralized ADA Office at **860-706-5310** or go to: www.jud.ct.gov/ADA/

Signature of Applicant or Petitioner

Address